

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Martin Willard et al. Art Unit : 3763
Serial No. : 10/715,636 Examiner : Theodore J. Stigell
Filed : November 18, 2003 Confirmation No.: 4327
Notice of Allowance Date:
Title : TARGETED COOLING OF TISSUE WITHIN A BODY

MAIL STOP ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed October 22, 2007, enclosed is a completed issue fee transmittal form PTOL-85b.

Please apply \$1740 for the required issue fee and publication fee and any additional charges or credits to our Deposit Account No. 06-1050.

Respectfully submitted,

Date: 12/13/07



Geoffrey P. Shipsides
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PART B – FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

26161 7590 10/22/07

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/715,636	11/18/2003	Martin Willard	10527-522001	4327

TITLE OF INVENTION: TARGETED COOLING OF TISSUE WITHIN A BODY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$1740	01/22/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
STIGELL, THEODORE J.	3763	604-508000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Fish & Richardson P.C.**

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Boston Scientific Scimed, Inc.

Maple Grove, MN

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.2.7.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.2.7.(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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(Authorized Signature)

(Date)

December 13, 2007

Typed or Printed Name Geoffrey P. Shipsides

Registration No. 55,617

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